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ORIGINAL

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### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2002

Estimated average burden hours per response...1

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTIORROCESSED DATE RECEIVED

SEC USE ONLY Serial Prefix

JAN 2 4 2002

21-38852

THOMSON

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Roberts and Company Publishers,

Filing Under (Check box(es) that apply):

[x] Rule 504 [ ] Rule 505 [ ] Rule 506 [ ] Section 4(6) [ ] ULOE

Type of Filing: [X] New Filing [ ] Amendment

### A. BASIC IDENTIFICATION DATA



1. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indiciate change.)

Roberts and Company Publishers, Inc.

Address of Executive Offices (Including Area Code)

(Number and Street, City, State, Zip Code)

Telephone Number

340 26th Avenue, San Mateo, CA 94403

(650) 577-8574

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

(if different from Executive Offices)

Same

**Brief Description of Business** 

scientific textbook publishing company.

http://www.sec.gov/divisions/corpfin/forms/formd.htm

Form I
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Page	Z	$\mathbf{o}_{\mathbf{I}}$	I	U

Type of Business Organizati	on
[X] corporation	[ ] limited partnership, already formed [ ] other (please specify):
[ ] business trust	[ ] limited partnership, to be formed
	Month Year
	Incorporation or Organization: [1 ] 1] [0] 1]
Jurisdiction of Incorporation	or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction) [C] [A]

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
Check Box(es) that Apply:	[ ] Promoter [x] Beneficial Owner	[x] Executive Officer	[x] Director [	General and/or Managing Partner
Full Name (Last nam	e first, if individual)			
Benjamin W.	Roberts			
	ce Address (Number and Street nue, San Mateo, CA	•	e)	
Check Box(es) that Apply:	[ ] Promoter [x] Beneficial Owner	[ ] Executive Officer	[X] Director [	General and/or Managing Partner
Full Name (Last nam	e first, if individual)			
Irving Weissr	nan		•	
Business or Residen	ce Address (Number and Street	, City, State, Zip Code	∍)	
Stanford Univ	ersity, B-257 Beckm	an Center, St	anford, CA	94305
Check Box(es) that Apply:	[ ] Promoter [x] Beneficial Owner	[ ] Executive Officer	[계 Director [ ]	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
William Robe	rts			
	ce Address (Number and Street,	City, State, Zip Code	e)	
P.O. Box 110	B, South Orleans, MA	02662		
Check Box(es) that Apply:	[ ] Promoter [x] Beneficial Owner	[ ] Executive Officer	[ ¾ Director [ ]	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Leroy Hood				
Business or Residence	ce Address (Number and Street,	City, State, Zip Code	e)	
6411 Northeas	st Windermere Road.	Seattle. WA 9	8105	
Check Box(es) that Apply:	[ ] Promoter [x] Beneficial Owner	[ ] Executive Officer		General and/or Managing Partner
Full Name (Last name	e first, if individual)			
John Abelson				
	ce Address (Number and Street,	City, State, Zip Code	<del>)</del>	
1097 Blanche	#316, Pasadena, CA	91106		
Check Box(es) that Apply:	[ ] Promoter [x] Beneficial Owner	[ ] Executive Officer	½ Director [ ]	General and/or Managing Partner

Full Name (Last name first, if individual)	
David Hirsh	·
Business or Residence Address (Number and Street, City, State, Zip Code)	
630 West 168th Street, Room 5-424, New York, NY 10032	
Check Box(es) that [ ] Promoter [x] Beneficial [ ] Executive [ ] Director [ ] Apply:  Owner Officer	] General and/or Managing Partner
Full Name (Last name first, if individual)	
Joseph Goodman	
Business or Residence Address (Number and Street, City, State, Zip Code)	
570 University Terrace, Los Altos, CA 94022	
(Use blank sheet, or copy and use additional copies of this sheet, as ne	cessary.)
B. INFORMATION ABOUT OFFERING	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?	Yes No [X] [] in
N/A  Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	] All States
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[HI] [ID] [MS] [MO] [OR] [PA] [WY] [PR]

Full Name (Last name first, if individual)

Busine	ss or Re	esidence	e Addres	ss (Num	bėr and	Street, C	ity, State	e, Zip Co	de)			dalar dibilik dagi persepengan pangan kelanggan pengangan pentabah sanah
Name	of Assoc	ciated B	roker or	Dealer						***************************************		
						Intends States		t Purchas	sers	[	] All S	tates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	ıme (La	st name	first, if i	ndividua	l)							
Busine	ss or Re	esidence	e Addres	ss (Num	ber and	Street, C	ity, State	e, Zip Co	de)			
Name	of Asso	ciated B	roker or	Dealer								
						Intends States		t Purchas	sers	[	] All S	tates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
**************************************	(	Use bla	nk shee	et, or co	py and	use add	itional c	opies of	this she	eet, as n	ecessar	<b>/</b> .)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security Debt	Aggregate Offering Price \$ 0	Amount Already Sold \$ 0
Equity	\$ 8,000	\$ 8,000
[ ] Common [ ] Preferred  Convertible Securities (including warrants)	<b>\$</b> 0	\$ 0
Partnership Interests	\$0	\$0
Other (Specify).	\$0	\$0
Total	\$ 8,000	\$ 8,000
Answer also in Appendix, Column 3, if filing under ULOE.		

<sup>1.</sup> Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

2. Enter the number of accredited and non-accredited investors who purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	5	\$ 8,000
Total (for filings under Rule 504 only)	5	* * * *

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollai Sold	r Amount	
Rule 505	N/A	\$	0	
Regulation A	N/A	\$	0	
Rule 504	common	\$	0	_
Total	····	\$		

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[]\$0
Legal Fees	[]\$
Accounting Fees	[]\$0
Engineering Fees	[]\$0
Sales Commissions (specify finders' fees separately)	[]\$0
Other Expenses (identify)	[]\$0
Total	[]\$

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." ............

8,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Payments to Officers, Payments

		Affiliat	es Others
Salaries and fees		[] \$	[] \$
Purchase of real estate		[]	[]
Purchase, rental or leasing and installation and equipment	of machinery	\$ [ ] \$	\$ [] \$\$
Construction or leasing of plant buildings a	and facilities	[]	[]
Acquisition of other businesses (including a securities involved in this offering that may exchange for the assets or securities of ar pursuant to a merger)	y be used in nother issuer	[]	[] \$\$
Repayment of indebtedness		[ ] \$	[] \$
Working capital		[]	<u></u> ችች \$ 8,000
Other (specify):		[]	[]
		\$ []	\$ []
		\$	\$
Column Totals		[] \$	<u>*</u> *8,000
Total Payments Listed (column totals adde	ed)	k	<u>k\$8,000</u>
D. F ssuer has duly caused this notice to be sig under Rule 505, the following signature cor	nstitutes an undertaking by	y the issuer to f	urnish to the U.S.
ssuer has duly caused this notice to be sig under Rule 505, the following signature cor rities and Exchange Commission, upon wr	ned by the undersigned dinstitutes an undertaking by itten request of its staff, th	y the issuer to f	urnish to the U.S.
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